

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	ERW	70622 71000	3-199 2/22/99
O.I.P.E. CLASSIFIER	Smc	11	2/23
FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final Original	10/29/98
1	10/29/98
2	10/29/98
3	10/29/98
4	10/29/98
5	10/29/98
6	10/29/98
7	10/29/98
8	10/29/98
9	10/29/98
10	✓
11	✓
12	✓
13	✓
14	✓
15	✓
16	✓
17	✓
18	✓
19	✓
20	✓
21	✓
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31	✓
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40	✓
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Claim	Date
Final Original	03/04/99
24	✓
25	✓
26	✓
27	✓
28	✓
29	✓
30	✓
31	✓
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Claim	Date
Final Original	
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If more than 150 claims or 10 actions  
staple additional sheet here